

Work Order ID 108348

\*108348\*

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October-16-13 10:34:38 AM

Item ID:	D3391-025	Accept	*N900040100*	Setup	Start	*NS1*		
Revision ID:				Stop		*NS2*		
Item Name:	Aft Tube Assembly							
Start Date:	10/16/13	Start Qty:	1.00	*1*	Cust Item ID:			
Required Date:	10/30/13	Req'd Qty:	1.00	*1*	Customer:			
Reference:								
Approvals:	Process Plan:	ML5	Date: 13/10/16	Tooling:	Date:	Run	Start	*NR1*
	QC:		Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3391	J								
100		0.00							
*100*	MORI SEIKI CNC LATHE LARGE								
Mori Seiki									
Mori Seiki CNC Lathe Large									
	Memo	0.00							
	Turn as per Folio FA\$99								
	Rev: A & Dwg D3391 Rev: H								
	***scribe batch # on fwd end at 90 degree***								
110	QC2- Inspect parts off machine FAI/FAIB	0.00							
*110*									
QC									
Quality Control									
	Memo	0.00							
112	QC5- Inspect part completeness to step on W/O	0.00	DAS						
*112*			27						
QC			9-89						
Quality Control									
	Memo	0.00	13/10/22						

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
			Work Order Update <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
				Large Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data	<input type="checkbox"/>										
Equip/Tooling	<input type="checkbox"/>										
Operator	<input type="checkbox"/>										
Material	<input type="checkbox"/>										
Setup	<input type="checkbox"/>										
Other	<input type="checkbox"/>										
Process	<input type="checkbox"/>										
Supplier	<input type="checkbox"/>										
Training	<input type="checkbox"/>										
Unapproved	<input type="checkbox"/>										
FAULT CATEGORY											
Landing Gear			General								
<input type="checkbox"/>	Bending	<input type="checkbox"/>	Bend	<input type="checkbox"/>	Grain	<input type="checkbox"/>	Ovalized	<input type="checkbox"/>	Pressure/Forced		
<input type="checkbox"/>	Centre Not Concentric to O/S	<input type="checkbox"/>	BOM/Route	<input type="checkbox"/>	Hardware	<input type="checkbox"/>	Over/Under tolerance	<input type="checkbox"/>	Temperature/Cure		
<input type="checkbox"/>	Cracks	<input type="checkbox"/>	Broken/Damaged	<input type="checkbox"/>	Inspection Incomplete	<input type="checkbox"/>	Part Incorrect	<input type="checkbox"/>	Weld		
<input type="checkbox"/>	Crushed/Crimped	<input type="checkbox"/>	Burrs	<input type="checkbox"/>	Instructions Incomplete/Unclear	<input type="checkbox"/>	Part Lost/Missing	<input type="checkbox"/>	Wrong Stock Pulled		
<input type="checkbox"/>	Cuffs	<input type="checkbox"/>	Contamination	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>	Part Moved	<input type="checkbox"/>			
<input type="checkbox"/>	Heat Treat	<input type="checkbox"/>	Countersink	<input type="checkbox"/>	Mislabeled	<input type="checkbox"/>	Positioned Wrong	<input type="checkbox"/>			
<input type="checkbox"/>	Inspection Strip in Tube	<input type="checkbox"/>	Cut Too Short	<input type="checkbox"/>	Misread	<input type="checkbox"/>	Power Loss/Surge	<input type="checkbox"/>			
<input type="checkbox"/>	Ripples in Bend	<input type="checkbox"/>	Drill Holes	<input type="checkbox"/>	Offset	<input type="checkbox"/>		<input type="checkbox"/>	Other		
<input type="checkbox"/>	Torque Waves in Extrusion	<input type="checkbox"/>	Drawing	<input type="checkbox"/>	Out of Calibration	<input type="checkbox"/>		<input type="checkbox"/>			
<input type="checkbox"/>	Turning Sequence	<input type="checkbox"/>	Finish	<input type="checkbox"/>	Out of Sequence	<input type="checkbox"/>		<input type="checkbox"/>			
<input type="checkbox"/>	Wave/Twist in Tube	<input type="checkbox"/>	Folio	<input type="checkbox"/>	Outside Dimensions	<input type="checkbox"/>		<input type="checkbox"/>			

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Item ID:	D3391-025	Accept	<b>*N900040100*</b>	Setup	Start	<b>*NS1*</b>	
Revision ID:				Stop		<b>*NS2*</b>	
Item Name:	Aft Tube Assembly						
Start Date:	10/16/13	Start Qty:	1.00	<b>*1*</b>	Cust Item ID:		
Required Date:	10/30/13	Req'd Qty:	1.00	<b>*1*</b>	Customer:		
Reference:							
Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	<b>*NR1*</b>
	QC:	Date:	SPC (Y/N):	Date:	Stop		<b>*NR2*</b>

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120 <b>*120*</b> HAAS I	HAAS CNC VERTICAL MACHINING #1  Memo 1-Machine as per Folio FA 599 Rev: AA & Dwg D3391 Rev: J 2-Deburr	0.00				1			SL13-11-1
130 <b>*130*</b> QC Quality Control	QC2- Inspect parts off machine FAI/FAIB  Memo	0.00							SL13-11-1
140 <b>*140*</b> QC Quality Control	QC8- Inspect parts - second check  Memo ***INSPECT INSIDE BORE***	0.00	DAS 40 8-89	13/11/04	1	Ø			

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/> Equip/Tooling <input type="checkbox"/> Operator <input type="checkbox"/> Material <input type="checkbox"/> Setup <input type="checkbox"/> Other <input type="checkbox"/> Process <input type="checkbox"/> Supplier <input type="checkbox"/> Training <input type="checkbox"/> Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/ Surge <hr/> <hr/> <hr/>							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <hr/>							
				<input type="checkbox"/> Other							

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Item ID:	D3391-025	Accept	*N900040100*	Setup	Start	*NS1*	
Revision ID:				Stop		*NS2*	
Item Name:	Aft Tube Assembly						
Start Date:	10/16/13	Start Qty: 1.00	*1*	Cust Item ID:			
Required Date:	10/30/13	Req'd Qty: 1.00	*1*	Customer:			
Reference:							
Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
150 <b>*150*</b> Skidtubes	Skidtubes	0.00				mm	13/11/04		
	Memo	0.00							
	1-Drill ( PILOT HOLE) aft cap holes per Dwg D3391 using DT8803								
160 <b>*160*</b> CNC Bend 1 CNC Delta 100 Bender	BENDING MACHINE - SKIDTUBES	0.00				-	DC13/11/05		
	Memo	0.00							
	Form as per Dwg D3391 Using Bend Prog 3391025								
170 <b>*170*</b> QC Quality Control	QC5- Inspect part completeness to step on W/O	0.00							
	Memo	0.00							

4.25"

DP 13-11-5

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
Part No. _____	Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
NCR No. _____	Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
	Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Other <input type="checkbox"/>				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples-in-Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						

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**Item ID:** D3391-025

Accept

**\*N900040100\***

Setup Start

**\*NS1\***

**Revision ID:**

Stop

**\*NS2\***

**Item Name:** Aft Tube Assembly

**Start Date:** 10/16/13    **Start Qty:** 1.00

**\*1\***

**Cust Item ID:**

**Required Date:** 10/30/13    **Req'd Qty:** 1.00

**\*1\***

**Customer:**

**Reference:**

**Approvals:** Process Plan:

Date:

Tooling:

Date:

Run Start

**\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop

**\*NR2\***

<b>Sequence ID/ Work Center ID</b>	<b>Operation Description</b>	<b>Set Up/ Run Hours</b>	<b>Tool ID</b>	<b>Tool #</b>	<b>Plan Code</b>	<b>Accept Qty</b>	<b>Reject Qty</b>	<b>Reject Number</b>	<b>Insp. Stamp</b>
180		0.00							

**\*180\***

Skidtubes

Skidtubes

Memo

1 Open Aft cap pilot hole to .208" as per Dwg D3391

2 Drill float bag holes using DT8809 as per Dwg D3391(Holes marked "A" Only.

3 Drill wearplate holes as per Dwg D3391 using DT8878(Mid Tube) & DT8217 Wearplate Jig.

\*\*\*\*\*Do Not Open To Finished Size\*\*\*\*\*

4 Drill Wearshoe holes as per DWG D3391 using DT8939 locating from 2 previously drilled aft wearplate holes.

5 Open wearplate holes to 0.250" and c'bore as per dwg D3391

6 Open up all wearshoe , wearplate to 0.297"and float bag holes to 0.328" as per Dwg D3391.

7 Deburr

mm

13/11/18

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>			Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
						Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
						Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance			Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>  <input type="checkbox"/>	
												<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
												<input type="checkbox"/> Other	

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Item ID: D3391-025

Accept

**\*N900040100\***

Setup

Start

**\*NS1\***

Revision ID:

Stop

**\*NS2\***

Item Name: Aft Tube Assembly

Start Date: 10/16/13 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 10/30/13 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	<b>*NR1*</b>
	QC:	Date:	SPC (Y/N):	Date:	Stop		<b>*NR2*</b>

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
190 <b>*190*</b> QC	QC5- Inspect part completeness to step on W/O Memo	0.00							DAS 13-11-18 9 9-89
200 <b>*200*</b> HandFinish Hand Finishing	Chemical Conversion Coat per QSI005 4.1 Memo	0.00							13-11-19 DGL/MW
210 <b>*210*</b> QC	QC7-Inspect Chemical Conversion Coat Memo	0.00							13-11-21 DD
Quality Control		0.00							

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube/ <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other			

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#### **Reference:**

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							

Work Order ID 108348

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Item ID: D3391-025

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Aft Tube Assembly

Stop

\*NS2\*

Start Date: 10/16/13 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 10/30/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

240

\*240\*

Powdercoat

White Gloss(Ref:4.3.5.1) per QSI005 4.3-Alum

11/26/2013

0.00

1/16/2013

DAS

34

9-89

Powder Coating

Memo

0.00

START TIME: 11:05  
OVEN TEMPERATURE: 320°  
FINISH TIME: 11:35

250

\*250\*

QC

Quality Control

QC3- Inspect Part Finish

0.00

1/16/2013

Memo

0.00

260

\*260\*

HandFinish

Hand Finishing

HandFinishing

0.00

1/16/2013

Memo

0.00

1-Install inserts as per Dwg D3391  
2-Install Aft Cap as per Dwg D3391  
A/R Sikaflex-241/-291 11/26/2013  
Sikaflex expiry date: 11/09

3- INSTALL WEARPLATES AS PER DWG

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced						
	<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure						
	<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld						
	<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled						
	<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved							
	<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong							
	<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge							
	<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset								
	<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration								
	<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence								
	<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions								

Work Order ID 108348

\*108348\*

Page 8

October-16-13 10:34:38 AM

Item ID:	D3391-025	Accept	*N900040100*	Setup	Start	*NS1*	
Revision ID:				Stop		*NS2*	
Item Name:	Aft Tube Assembly						
Start Date:	10/16/13	Start Qty: 1.00	*1*	Cust Item ID:			
Required Date:	10/30/13	Req'd Qty: 1.00	*1*	Customer:			
Reference:							
Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	*NR1*
	QC:	Date:	SPC (Y/N):	Date:	Stop		*NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
270 <b>*270*</b> QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo	0.00 0.00				1			DAS 05/14.01.21
280 <b>*280*</b> Packaging Packaging	Identify as per dwg & Stock Location: <u>W10</u>  Memo	0.00 0.00	D412-F42-043	/B110622		14	of	90	14.01.22
290 <b>*290*</b> QC Quality Control	QC21- Final Inspection - Work Order Release  Memo	0.00 0.00							14.01.22

NCR: Yes / No

DQA: Date:

## **WORK ORDER NON-CONFORMANCE / UPDATE**

**QA Closed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other				
Part No. _____											
NCR No. _____											
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear				General							
Bending	General			Grain	General			Ovalized	Pressure/Forced		
Centre Not Concentric to O/S	Bend	General			Hardware	General			Over/Under tolerance	Temperature/Cure	
Cracks	BOM/Route	General			Inspection Incomplete	General			Part Incorrect	Weld	
Crushed/Crimped	Broken/Damaged	General			Instructions Incomplete/Unclear	General			Part Lost/Missing	Wrong Stock Pulled	
Cuffs	Burrs	General			Maintenance	General			Part Moved		
Heat Treat	Contamination	General			Mislabeled	General			Positioned Wrong		
Inspection Strip in Tube	Countersink	General			Misread	General			Power Loss/Surge		
Ripples in Bend	Cut Too Short	General			Offset	General					
Torque Waves in Extrusion	Drill Holes	General			Out of Calibration	General					
Turning Sequence	Drawing	General			Out of Sequence	General					
Wave/Twist in Tube	Finish	General			Outside Dimensions	General					
	Folio	General				General					

# Picklist Print

October-16-13 10:34:43 AM

Page 1

Work Order ID: 108348

\*108348\*

\*D3391-025\*

Parent Item: D3391-025

Parent Item Name: Aft Tube Assembly

Start Date: 10/16/13

Required Date: 10/30/13

Start Qty: 1.00

Required Qty: 1.00

**Comments:**

IPP Rev B	06-02-07	ECN773 dwg rev. D	EC
IPP Rev:C	06-03-28	Update Manuf. Instructions	JLM
IPP rev D	07.03.20	revF dwg	EC
IPP rev E	07.11.07	rev G dwg ecn 1053p	EC verified by: DD
IPP Rev:F	07-11-13	ECN 1056	DD verified by: EC
IPP Rev:G	08-09-10	revH as per dwg	DD verified by:EC IPP Rev:H
11.11.14 AS PER REV.I DD verified by:JLM			

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4095-047		Manufactured	No			260	Each	16.0000	1	1		11/12/13	

\*D4095-047\*

Wearpad Assembly

Location	Loc Qty	Loc Code
FP001	16	
101069	1	
<u>102241</u>	9	X1
103052	6	

D4095-049

Manufactured

No

260 Each 29.0000

\*\*

11/12/13

\*D4095-049\*

Wearpad Assembly

Location	Loc Qty	Loc Code
FP001	6	
86246	5	
92731	1	
FP002	23	
<u>102216</u>	16	X1
103031	7	

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS							
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>						
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>						
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>						
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>							
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector				
Doc/Data													
Equip/Tooling													
Operator													
Material													
Setup													
Other													
Process													
Supplier													
Training													
Unapproved													
FAULT CATEGORY													
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other			

# Picklist Print

Page 2

October-16-13 10:34:43 AM

Work Order ID: 108348

\*108348\*  
\*D3391-025\*

Parent Item: D3391-025

Parent Item Name: Aft Tube Assembly

Start Date: 10/16/13

Required Date: 10/30/13

Start Qty: 1.00

Required Qty: 1.00

D6014-090

Manufactured No

100 Each

89.0000

1 1

\*\*

\*D6014-090\*

ALUMINUM EXTRUSION

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
LG	72	
(86063)	72	
LG015	17	
79742	17	

1 mm. 13/10/17

D3670-4-200

Manufactured No

230 Each

354.0000

4

\*\*

\*D3670-4-200\*

Bushing

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
FG	10	
87709	10	
LG	189	
101814	1	
102269	44	
103078	4	
103880	60	
96240	80	
LG001	115	
(104855)	94	
(78606)	2	
81972	4	
88580	15	
LG005	40	
80360	40	

DC13/11/21

(4)

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

## **WORK ORDER NON-CONFORMANCE / UPDATE**

**QA Closed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS										
			Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>									
Part No. _____																
NCR No. _____																
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector							
Doc/Data																
Equip/Tooling																
Operator																
Material																
Setup																
Other																
Process																
Supplier																
Training																
Unapproved																
FAULT CATEGORY																
Landing Gear				General												
Bending	<input type="checkbox"/>			Bend	<input type="checkbox"/>			Grain	<input type="checkbox"/>			Ovalized	<input type="checkbox"/>			Pressure/Forced
Centre Not Concentric to O/S	<input type="checkbox"/>			BOM/Route	<input type="checkbox"/>			Hardware	<input type="checkbox"/>			Over/Under tolerance	<input type="checkbox"/>			Temperature/Cure
Cracks	<input type="checkbox"/>			Broken/Damaged	<input type="checkbox"/>			Inspection Incomplete	<input type="checkbox"/>			Part Incorrect	<input type="checkbox"/>			Weld
Crushed/Crimped	<input type="checkbox"/>			Burrs	<input type="checkbox"/>			Instructions Incomplete/Unclear	<input type="checkbox"/>			Part Lost/Missing	<input type="checkbox"/>			Wrong Stock Pulled
Cuffs	<input type="checkbox"/>			Contamination	<input type="checkbox"/>			Maintenance	<input type="checkbox"/>			Part Moved	<input type="checkbox"/>			
Heat Treat	<input type="checkbox"/>			Countersink	<input type="checkbox"/>			Mislabeled	<input type="checkbox"/>			Positioned Wrong	<input type="checkbox"/>			
Inspection Strip in Tube	<input type="checkbox"/>			Cut Too Short	<input type="checkbox"/>			Misread	<input type="checkbox"/>			Power Loss/Surge	<input type="checkbox"/>			
Ripples in Bend	<input type="checkbox"/>			Drill Holes	<input type="checkbox"/>			Offset	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			
Torque Waves in Extrusion	<input type="checkbox"/>			Drawing	<input type="checkbox"/>			Out of Calibration	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			
Turning Sequence	<input type="checkbox"/>			Finish	<input type="checkbox"/>			Out of Sequence	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			
Wave/Twist in Tube	<input type="checkbox"/>			Folio	<input type="checkbox"/>			Outside Dimensions	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>			

# Picklist Print

Page 3

October-16-13 10:34:43 AM

Work Order ID: 108348

\*108348\*  
\*D3391-025\*

Parent Item: D3391-025

Parent Item Name: Aft Tube Assembly

Start Date: 10/16/13

Required Date: 10/30/13

Start Qty: 1.00

Required Qty: 1.00

D2646

Manufactured No

270

Each

59.0000

1

1

\*\*

LL 13112118

\*D2646\*

Aft Cap

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>	
FG	4	B107857	X1
85848	2		
90495	2		
FP001	55		
103056	6		
103306	20		
62678	5		
68280	5		
70945	1		
71070	2		
73294	1		
73825	2		
79562	2		
85443	2		
85848	2		
91189	5		
93661	2		

October-16-13 10:34:43 AM

Shop Packet Print

Page 3

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order:			DISPOSITION			AGAINST DEPARTMENT/PROCESS																																						
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>																								
Part No. _____ NCR No. _____			Work Order Update <input type="checkbox"/>																																									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description			Sign & Date	Verification	QC Inspector																																
Doc/Data																																												
Equip/Tooling																																												
Operator																																												
Material																																												
Setup																																												
Other																																												
Process																																												
Supplier																																												
Training																																												
Unapproved																																												
FAULT CATEGORY																																												
Landing Gear				General																																								
				Bending <input type="checkbox"/>	Centre Not Concentric to O/S <input type="checkbox"/>	Cracks <input type="checkbox"/>	Crushed/Crimped <input type="checkbox"/>	Cuffs <input type="checkbox"/>	Heat Treat <input type="checkbox"/>	Inspection Strip in Tube <input type="checkbox"/>	Ripples in Bend <input type="checkbox"/>	Torque Waves in Extrusion <input type="checkbox"/>	Turning Sequence <input type="checkbox"/>	Wave/Twist in Tube <input type="checkbox"/>	Bend <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Burrs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Countersink <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Drawing <input type="checkbox"/>	Finish <input type="checkbox"/>	Folio <input type="checkbox"/>	Grain <input type="checkbox"/>	Hardware <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Misread <input type="checkbox"/>	Offset <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Part Moved <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>	<input type="checkbox"/> Other

# Picklist Print

Page 4

October-16-13 10:34:43 AM

Work Order ID: 108348

\*108348\*  
\*D3391-025\*

Parent Item: D3391-025

Parent Item Name: Aft Tube Assembly

Start Date: 10/16/13

Required Date: 10/30/13

Start Qty: 1.00

Required Qty: 1.00

D3672-1

Manufactured No

270

Each

1,377.000

2

2

\*\*

11 131218

\*D3672-1\*

Phenolic Washer

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

FG	10	
85222	10	
ST061	366	
83608	3	
91325	11	
<u>99099</u>	352	
ST062	1001	X2
103845	461	
91325	13	
93886	527	

ALS4-1032-130

Purchased No

260

Each

3,676.000

14

14

\*\*

11 131218

Rivnut

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
-----------------	----------------	-----------------

FP001	389	
119084	116	
120671	89	
120807	36	
120837	8	
121269	140	
ST279	40	
124080	40	
st510	1247	
124163	160	
M126109	1087	
st555	2000	
<u>M127028</u>	2000	X14

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			<b>DISPOSITION</b>		<b>AGAINST DEPARTMENT/PROCESS</b>					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>			
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>			
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>			
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>				
Root Cause		Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data	<input type="checkbox"/>									
Equip/Tooling	<input type="checkbox"/>									
Operator	<input type="checkbox"/>									
Material	<input type="checkbox"/>									
Setup	<input type="checkbox"/>									
Other	<input type="checkbox"/>									
Process	<input type="checkbox"/>									
Supplier	<input type="checkbox"/>									
Training	<input type="checkbox"/>									
Unapproved	<input type="checkbox"/>									
<b>FAULT CATEGORY</b>										
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube					<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		
									<input type="checkbox"/> Other	

# Picklist Print

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October-16-13 10:34:43 AM

Work Order ID: 108348

\*108348\*

Parent Item: D3391-025

\*D3391-025\*

Parent Item Name: Aft Tube Assembly

Start Date: 10/16/13

Required Date: 10/30/13

Start Qty: 1.00

Required Qty: 1.00

ALS4-1032-225

Purchased

No

270

Each

1,543.000

8

8

\*\*

131218

\*AI S4-1032-225\*

Rivnut

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	ST280	743	
	M125954	20	
	M127028	723	
	st555	800	
	<u>M127092</u>	800	

AN3C4A

Purchased

No

270

Each

2,966.000

6

6

\*\*

131218

\*AN3C4A\*

Bolt

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	FG	20	
	122814	20	
	ST512	2946	
	<u>125388</u>	2376	
	M126765	570	

AN3C5A

Purchased

No

270

Each

294.0000

4

4

\*\*

131218

\*AN3C5A\*

Bolt

	<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
	FG	5	
	122800	5	
	ST512	289	
	125388	289	

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b>	<b>AGAINST DEPARTMENT/PROCESS</b>				
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>	
NCR No. _____						

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b>	<b>General</b>			
Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube <input type="checkbox"/>	Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burr <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/>	Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabelled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions <input type="checkbox"/>	Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other <input type="checkbox"/>

# Picklist Print

Page 6

October-16-13 10:34:43 AM

Work Order ID: 108348

\*108348\*  
\*D3391-025\*

Parent Item: D3391-025

Parent Item Name: Aft Tube Assembly

Start Date: 10/16/13

Required Date: 10/30/13

Start Qty: 1.00

Required Qty: 1.00

NAS1149C0332R

Purchased

No

270

Each

9,489.000

10

10

\*\*

ll  
(3/12) + 8

\*NAS1149C0332R\*

WASHER

<u>Location</u>	<u>Loc Qty</u>	<u>Loc Code</u>
FP001	264	
	123355	
ST292	119	
	123248	
	123759	
	125268	
st510	6000	
	m126319	X10
ST511	2954	
	125654	
ST517	152	
	122063	
	124580	

October-16-13 10:34:43 AM

Shop Packet Print

Page 6

NCR: Yes / No

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

**WORK ORDER NON-CONFORMANCE / UPDATE**

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b>	<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____	Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/> Small Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>		
NCR No. _____							

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b>	<b>General</b>		
Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Ovalized	<input type="checkbox"/> Pressure/Forced
Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Over/Under tolerance	<input type="checkbox"/> Temperature/Cure
Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Part Incorrect	<input type="checkbox"/> Weld
Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Part Lost/Missing	<input type="checkbox"/> Wrong Stock Pulled
Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Part Moved	
Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Positioned Wrong	
Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Other
Ripples in Bend	<input type="checkbox"/> Drill Holes		
Torque Waves in Extrusion	<input type="checkbox"/> Drawing		
Turning Sequence	<input type="checkbox"/> Finish		
Wave/Twist in Tube	<input type="checkbox"/> Folio		

DART AEROSPACE LTD	Work Order:	108348
Description: Float Skidtube (412)	Part Number:	D3391-3
Inspection Dwg: D3391 Rev: I		Page 1 of 1

### FIRST ARTICLE INSPECTION CHECKLIST

Drawing Dimension	Tolerance	Actual Dimension	Accept	Reject	Method of Inspection	Comments
Lathe Section						
14.000	+/-0.010	14.00	/		tape	L6-25
3.500	+/-0.010	3.503	/		vern	CNC-C8
Ø3.200	+/-0.010	3.197	/			
Ø3.750	+/-0.010	3.750	/			
30° x 0.060 chamfer	+/-0.010	30° X .060	/			
88.93	+/-0.030	88.62	/		tape	L6-25

Measured by: M.M.L

Date: 13/10/20

Audited by: S.H.

Date: 13/10/20

HAAS Section						
1.526	+0.000/-0.030	1.570	/		Vern	CNC-02
7.500	+/-0.010	7.500	/			
27.750	+/-0.010	27.750	/		M-TAPE	
31.750	+/-0.010	31.750	/			
35.250	+/-0.010	35.250	/			
3.300	+/-0.010	3.299	/		Vern	
0.200	+/-0.010	0.201	/			
3.520	+/-0.010	3.520	/		mic	104-187
0.687	+0.010/-0.000	0.690	/		Vern	
R0.062	+/-0.010	0.062	/			
Ø0.484	+0.005/-0.001	0.487	/			

Measured by: SL

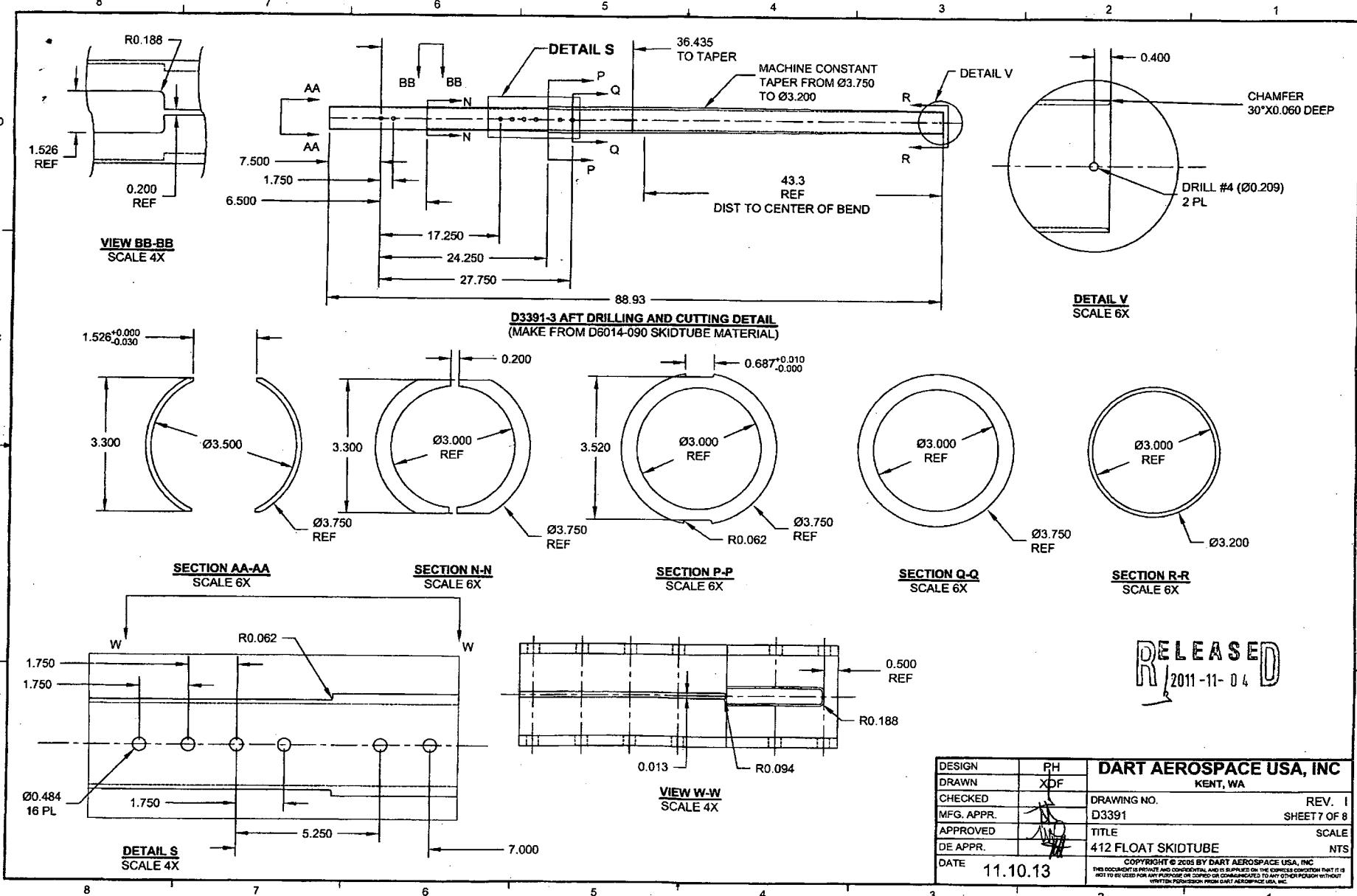
Date: 13-11-1

Audited by: DAS  
40

Date: 13-11-09

Rev	Date	Change	Revised by	Approved
A	06.04.24	New Issue	P/O D3391-015/-025	KJ/JLM
B	06.06.19	Dwg revision update		KJ/JLM
C	07.04.20	Ø0.208 dimension removed		KJ/JLM
D	07.09.06	0.400 dimension removed		KJ/JLM
E	07.11.23	Dwg Rev. updated		KJ/EC/DD
F	09.04.27	Dimensions updated per Rev H and NCR09-028		KJ/JLM
G	09.11.16	Dimension 0.200 removed		KJ
H	11.06.21	Dimension 44.995 removed		KJ
I	12.05.15	Dwg Rev updated		KJ
J	12.05.23	Dimension updated		KJ
K	12.10.15	88.93 dimension removed		KJ
L	12.11.28	88.93 dimension added		KJ





108348 MLJ  
13-10-10

108348

